

West Virginia Consolidated Public Retirement Board (CPRB)

601 57th Street SE, Suite 5 Charleston, WV 25304 304-558-3570 or 800-654-4406 *www.wvretirement.com* Deputy Sheriff Retirement System (DSRS)

Membership Enrollment

All Deputy Sheriffs and Chief Deputy Sheriffs employed on or after July 1, 1998 must become participating members of DSRS. Membership in this retirement system is a condition of employment. Elected Sheriffs may participate in DSRS if certain criteria are met. Contact CPRB for details.

Section 1: Employee Information

Full Name	5	SSN			Date	e of Birth		Gender		
								Female	Male	
Employee Mailing Address	(City					State	Zip Code		
Employee Email Address			Home Telephone Number				Mobile Telephone Number			
Employer Name			Employment Begin Date J			osition				
						Deputy Sher	riff Chie	ef Deputy	Sheriff	
Position Status	Scheduled I	Hours Payroll Frequency						Rate of	f Pay	
Regular Part Time Temporary Elected	Per Day		Weekly	Bi-We	ekly	Semi-Mo	onthly M	onthly \$		
Type of Rate of Pay Are you re	tired under ar	ny of the	State's Retirem	ent Syste	ems?	Yes No	Do you hav	e previous Mil	itary Service?	
Daily Hourly Monthly Yearly If yes, ple	ase list the ret	tirement	system:				If yes, subn	Yes No nit a copy of yc	our DD-214.	

Section 2: Dependent Information: (If more space is needed for dependent listings, attach a sheet of paper with information)

Spouse Name	SSN	Date of Birth
Child Name	SSN	Date of Birth
Child Name	SSN	Date of Birth
Child Name	SSN	Date of Birth
Child Name	SSN	Date of Birth

Section 3: Acknowledgment and Signature

I understand that 8.5% of my salary will be deducted each pay period and these funds will be forwarded to CPRB and contributed to DSRS on my behalf.

Employee Signature

Date Signed

Section 4: CPRB Internal Use Only

Pre-Retiremer	t Beneficiary form received?	Yes	No	Comment:
eviewed by:				Dat